				<u>.</u>	091839259					
·						oplication or Docket Number				
PAYENT APPLICATION FEE DETERMINATION RECOR Effective October 1, 2000						. WE	-5 r	- M -0	וני זט	
CLAIMS AS FILED - PART I (Column 1) (Column		nn 2)		SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY			
TOTAL CLAIMS	36			R	RATE		7	RATE	FEE	
FOR	NUMBER FILED	NUMBE	REXTRA	BAS	C FEE	355.00	OR	BASIC FEE	·710.00	
TOTAL CHARGEABLE CLAIMS	უქ minus 20=	· 14		X	9=	MILI	OR	X\$18=		
INDEPENDENT CLAIMS 3 minus 3 =					X40=		OR	X80=		
MULTIPLE DEPENDENT CLAIM PRESENT			+135=		OR	+270=				
* If the difference in column 1 is less than zero, enter *0" in column 2			TO	TOTAL 499		OR	TOTAL			
COlumn 1) (Column 2) (Column 3)					SMALL ENTITY		OR	OTHER THAN		
CLAIMS REMAINING AFTER AMENDMENT Total Independent CLAIMS REMAINING AFTER AMENDMENT Total Independent	HIGH NUM PREVI PAID	BER	PRESENT EXTRA	RZ	TE	ADDI- TIONAL FIEE		RATE	ADDI- TIONAL FEE	
Total · 36	Minus (2	36	20	XS	9=	1	OR	X\$18=		
independent • 3	Minus •••	$2 \perp$	â	X4	0=		OR	X80=	·	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM NON-(DANGELLUS)			+13	15=		OR	+270=			
1 -102			ADDIT	OTAL	B	OR	TÖTAL ADOIT, FEE			
03 (Column 1) (Column 2) (Column 3)										
CLAIMS REMAINING AFTER AMENDMENT Total Independent Total	HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	RA	TE '	, ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Total · S6	Minus 3	6	0	XS	9=	\	OR	X\$18=		
Independent • 3	Minus ••• S		9	X4	0=	·	OR	X80=		
THIST PRESENTATION OF IN-	DETIT CE DEP ENDENT	OD-SIM		+13	15 =		OR	+270=		
1011-				ADDIT	OTAL FEE	6	OR	TOTAL ADDIT. FEE		
12 19 6 (Column 1)	(Cotur		Column 3)						1	
CLAIMS REMAINING AFTER AMENDMENT Total Independent Total	MIGH NUM PREVIC PAID	BER	PRESENT _EXTRA	RA	TE.	ADDI- TIONAL FEE	-	RATE	ADDI- TIONAL FEE	
Total • 30	Minus •• 3	6	• /	X\$	9=		OR	X\$18=		
independent • The state of the	Minus	\rightarrow	- /	X4	0=		OR	X80=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					_		1	.070		

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20.*

**The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number tound in the appropriate box in column 1.

OR ADDIT. FEE